



5326

STATE OF UTAH CONTRACT

Amendment # 2 to Contract # 039230

TO BE ATTACHED TO AND MADE A PART OF the above numbered contract by and between the State of Utah

Department of Transportation		Traffic Operation Center		referred to as STATE and	
Agency		Division			
Custom Lighting	91840A	Bree VanWageneen			
Company Name	Vendor Number	Contact Person			
668 West 9320 South Suite #B	Sandy	UT	84070 -6663	(801)	569-9219
Address	City	State	ZIP Code	Phone #	
referred to as CONTRACTOR					

THE PARTIES AGREE TO AMEND THE CONTRACT AS FOLLOWS:

1. The contract period is amended
- from: 30, June 2003 (Original starting date)
- to: 30, June 2007 (New ending date)
2. The Dollar amount of change to the contract for this amendment is: \$ <u>N/A</u>
3. The total contract amount is now changed:
- from: N/A (current contract amount)
- to: N/A (current contract amount +/- amendment amount)
4. Other changes to the contract include:

The contract now reads:
The contract is amended to read:
Exercising the renewal option for another year

5. Effective Date of Amendment: 06/30/06

All other conditions and terms in the original contract remain the same.
IN WITNESS WHEREOF, the parties sign and cause this contract to be executed.

CONTRACTOR		STATE OF UTAH	
<i>Bree Van Wageneen</i>	<i>06/11/06</i>	<i>Kelvin G. Thacker</i>	<i>17WIA466</i>
Contractor's Signature	Date	Kelvin G. Thacker, Procurement Service Manager	Date
Bree Van Wageneen		<i>DRichino</i>	JUN 11 2006
Contractor's Name		Director, Division of Purchasing	Date
		CONTRACT RECEIVED AND PROCESSED BY	JUN 14 2006
		DIVISION OF FINANCE	
Title		Director, Division of Finance	Date
Denice McCarthy	801 965-4761		
Purchasing Agent	Phone #		

MARSH**CERTIFICATE OF INSURANCE**CERTIFICATE NUMBER
CHI-001479519-01**PRODUCER**Marsh USA Inc.
2405 Grand Boulevard
P.O. Box 419105
Kansas City, MO 64141-6105
Attn: CSS (816) 556-4290 (816) 556-4299 (fax)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER OTHER THAN THOSE PROVIDED IN THE POLICY. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES DESCRIBED HEREIN.

COMPANIES AFFORDING COVERAGE**COMPANY****A** NATIONAL FIRE INSURANCE CO. OF HARTFORD**COMPANY****B** TRANSCONTINENTAL INSURANCE COMPANY**COMPANY****C****COMPANY****D**

S08724-All-CAS-05-06 Salt L CLS UT 479519

INSUREDCustom Lighting Services, LLC
668 West 9320 South
Suite B
Sandy, UT 84070-6663**COVERAGES**

This certificate supersedes and replaces any previously issued certificate for the policy period noted below.

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THIS IS TO CERTIFY THAT POLICIES OF INSURANCE DESCRIBED HEREIN HAVE BEEN ISSUED TO THE INSURED NAMED HEREIN FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THE CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, CONDITIONS AND EXCLUSIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	TPE 2087774928	11/01/05	11/01/06	GENERAL AGGREGATE \$ 2,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS - COMP/OP AGG \$ 2,000,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADV INJURY \$ 1,000,000
	<input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> Per Job Gen Agg				FIRE DAMAGE (Any one fire) \$ 200,000
					MED EXP (Any one person) \$ 15,000
B	AUTOMOBILE LIABILITY	BUA 2087774931	11/01/05	11/01/06	COMBINED SINGLE LIMIT \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE \$
	<input checked="" type="checkbox"/> HIRED AUTOS				
	<input checked="" type="checkbox"/> NON-OWNED AUTOS				
	<input checked="" type="checkbox"/> Collision: \$1,000 ded.				
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY: \$
					EACH ACCIDENT \$
					AGGREGATE \$
	EXCESS LIABILITY				EACH OCCURRENCE \$
	<input type="checkbox"/> UMBRELLA FORM				AGGREGATE \$
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM				\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WC2087774945 COVERED STATES: ALL STATES	11/01/05	11/01/06	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER \$
	THE PROPRIETOR/ PARTNERS/EXECUTIVE OFFICERS ARE: <input checked="" type="checkbox"/> INCL <input type="checkbox"/> EXCL				EL EACH ACCIDENT \$ 1,000,000
					EL DISEASE-POLICY LIMIT \$ 1,000,000
					EL DISEASE-EACH EMPLOYEE \$ 1,000,000
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

Amendment #2 to Contract 03-9230

CERTIFICATE HOLDERUtah Department of Transportation (UDOT)
Attn: Shauna Sisneros
4501 South 2700 West
Box 141510
Salt Lake City, UT 84114-1510**CANCELLATION**SHOULD ANY OF THE POLICIES DESCRIBED HEREIN BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE INSURER AFFORDING COVERAGE WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED HEREIN, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER AFFORDING COVERAGE, ITS AGENTS OR REPRESENTATIVES, OR THE ISSUER OF THIS CERTIFICATE.

MARSH USA INC.

BY: Keith A. Stiles

MM1(3/02)

VALID AS OF: 05/31/06